BIRCH, STEWART, KOLASCH & BIRCH, LLP

P.O. Box 747 • Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050 ATTORNEY DOCKET NO. 3273-0196PUS1

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:

COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Insert Title:	PHOTORESIST RESIN AND PHOTORESIST RESIN COMPOSITION						
•	the specification of which is attached hereto.	If not attached hereto,					
Fill in Appropriate	the specification was filed on			as			
Information -	United States Application Number			;			
For Use Without	and amended on	(if applicable); and/or					
Specification	the specification was filed on						
Attached:	<u> </u>	,	8845				
	amended on	A CATOR AVV II VV		(if applicable)			
				·			
	I hereby state that I have reviewed and up any amendment referred to above. I acknowledge the duty to disclose infom §1.56. I do not know and do not believe the sethereof, or patented or described in any primprior to this application, that the same was not application, that the invention has not been application in any country foreign to the Unit more than twelve months (six months for de on this invention has been filed in any cour representatives or assigns, except as follows. I hereby claim foreign priority benefits or inventor's certificate listed below and have	ame was ever known o ted publication in any ot in public use or on so patented or made the ted States of America (signs) prior to this appartry foreign to the Units.	It to patentability as defined in Title 37, or used in the United States of America country before my or our invention that in the United States of America mo subject of an inventor's certificate is on an application filed by me or my legilication, and that no application for pred States of America prior to this application for pred States Code, §119 (a)-(d) of any force	Code of Federal Regulations, a before my or our invention hereof or more than one year re than one year prior to this sued before the date of this yal representatives or assigns attent or inventor's certificate plication by me or my legal trign application(s) for patent			
	a filing date before that of the application of			_			
Insert Priority	Prior Foreign Application(s)			Priority Claimed			
Information:	2003-354224	<u>JAPAN</u>	October 14, 2003				
(if appropriate)	(Number)	(Country)	(Month / Day / Year Filed)	Yes No			
Insert Provisional Application(s):	(Number)	(Country)	(Month / Day / Year Filed)				
	(Number)	(Country)	(Month / Day / Teal Filed)	Yes No			
	(Number)	(Country)	(Month / Day / Year Filed)	Yes No			
	, ,	•	•				
	(Number)	(Country)	(Month / Day / Year Filed)	Yes No			
	I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below.						
	(Application Number)			(Filing Date)			
	(Application Number)			(Filing Date)			
	All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed more than 12 months (6 months for designs) Prior to the Filing Date of this Application:						
Insert Requested Information: (if appropriate)	Country		Application Number Dat	e of Filing (Month / Day / Year)			
Insert Prior U.S.	I hereby claim the benefit under Title 35, United States Code, §120 of any United States and/or PCT application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:						
Application(s):	(Application Number)	(Filing Date) (Status - patented, pending, abar		ed, pending, abandoned)			
Page 1 of 2	(Application Number)	(Filing Date) (Status - patente	ed, pending, abandoned)			

I hereby appoint the practitioners at CUSTOMER NO. 2292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

PLEASE NOTE: YOU MUST

BIRCH, STEWART, KOLASCH & BIRCH, LLP or CUSTOMER NO. 2292

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

FOLLOWING:							
Full Name of First or	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*		
Sole Inventor: Insert Name of Inventor Insert Date This Document is Signed	Shigeki_	KAMBARA	Spineki Kambara		12/1/2004		
Insert Residence Insert Citizenship	Residence (City, State Himeji-shi, Hyogo	<u> </u>	,	CITIZENSHIP JAPAN			
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Full Name of Second Inventor, if any:	GIVEN NAME Masaaki	FAMILY NAME KISHIMURA	INVENTOR'S SIGNATURE		DATE*		
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Full Name of Third Inventor, if any	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*		
see above	Residence (City, State	& Country)		CITIZENSHIP			
	MAILING ADDRESS (Complete Street Address including City, State & Country)						
Full Name of Fourth Inventor, if any	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*		
see above	Residence (City, State	e & Country)		CITIZENSHIP			
	MAILING ADDRESS (Complete Street Address including City, State & Country)						
Full Name of Fifth Inventor, if any	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*		
see above	Residence (City, State	e & Country)		CITIZENSHIP			
Page 2 of 2 (Revised 01/02)	• DATE OF SIGNATUR						